




**Present:** Akatu Marsters, Belinda Walker, Eseta Nonu-Reid, Marita Ranclaud, Rachel Poaneki, Katherine Fell, Lesley Watkins & Connie Hui

**Apologies:** Jenny James & Tom Scott

No.	Topic	Discussion Points	Planned Action	By
1.0	<b>Whakatau / Welcome</b>	<ul style="list-style-type: none"> <li>Meeting chaired by Marita</li> </ul>		
1.1	<b>Approval Previous Minutes</b>	<ul style="list-style-type: none"> <li>Minutes moved as a true and correct record by Marita and seconded by Eseta</li> </ul>		
1.2	<b>Matters Arising</b>	<p><b>Hua Oranga</b></p> <ul style="list-style-type: none"> <li>Te Rau Matatini presented Hua Oranga at Nga Purei (Maori Advisory Group)</li> <li>Collecting email distribution list from individuals</li> <li>Training will be rolled out in the future, only to those who have registered email addresses</li> <li>The template has been trialled with five pilots in the Midland region – Te Rau Matatini will collect this data and analyse</li> <li>The presentation, websites and additional information covered by Hua Oranga will be circulated</li> </ul> <p><b>ADON – Addictions Measurement Tool</b></p> <ul style="list-style-type: none"> <li>This has been completed for the Methamphetamine beds in the region</li> <li>If other addictions services want to take this onboard they will need to do this at their own discretion. This to be discussed at MRADD and give feedback</li> </ul>	<ul style="list-style-type: none"> <li>Eseta to follow up with Matua Raki</li> </ul>	
2.0	<b>AGENDA ITEMS</b>			
2.1	<b>NASC Report Consultation</b>	<p><b>Purpose</b> – to give feedback on NASC report and discuss the recommendations within the document. All are encouraged to give feedback to the report, access to the full report can be found on the Midland website</p> <ul style="list-style-type: none"> <li>Roz thanked everyone for their speedy feedback to the report. All feedback will be due no later than the 31 March</li> <li>The individual names &amp; DHBs were taken out of the report purposely</li> <li>Variation of NASC services (models) delivered in the region – no evidence one model works better than the other</li> <li>Need to be clear what the models are and ensure this is known and</li> </ul>	<ul style="list-style-type: none"> <li>Further feedback to be in no later than the 31 March</li> </ul>	

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		<p>understood by everyone</p> <ul style="list-style-type: none"> <li>▪ NASC teams will be brought together to discuss the recommendations and feedback based on the report before document finalised</li> <li>▪ Tu Tama Wahine a Taranaki Kaupapa NASC services is doing well in their delivery of NASC – make contact with Norah Puketapu for support &amp; get suggestions on how their services are run</li> </ul>	<ul style="list-style-type: none"> <li>▪ Support from PMgrs around who are the NASC teams</li> </ul>	
2.2	<b>Additional Resource for the Midland Team</b>	<p><b>Overview</b> What support mechanism can be put in place to assist Eseta in her regional role?</p> <p><b>PRIMHD Resource</b></p> <ul style="list-style-type: none"> <li>▪ 11/12 budgets includes a 0.5FTE for PRIMHD and 0.5 FTE Midland Data Analyst</li> <li>▪ This will enable better managed access rates for the region</li> </ul>		
2.3	<b>Regional Dementia</b>	<ul style="list-style-type: none"> <li>▪ Please refer to embedded presentation by Ruth Thomas</li> </ul>  <p>S:\LDHB Planning &amp; Funding\Midland Regi</p> <ul style="list-style-type: none"> <li>▪ Request to feedback or recommendations on the Newsletter and Pamphlet which was given by those present</li> <li>▪ Midland offered to add a page dedicated to Dementia to support Ruth to enable access to newsletters and other material</li> </ul>	<ul style="list-style-type: none"> <li>▪ Akatu to setup access for Ruth</li> </ul>	
2.4	<b>Regional Swap Shops</b>	<p><b>Swap Shops</b></p> <ul style="list-style-type: none"> <li>▪ The Midland forums will be holding “swap shops” prior to the strategic planning days. Each group is asked to look at what incentives have been working well in their districts and show case these on Day 1 of the strategic planning days.</li> <li>▪ A request for the Portfolio Managers to support their districts and the planning days</li> </ul> <p><b>CFU Midland Interface</b></p> <ul style="list-style-type: none"> <li>▪ Midland accepting the additional beds – One high dependency bed and the others will be general beds</li> <li>▪ Unfortunately no data has been received from Starship to date therefore no data no backdate for 2011</li> <li>▪ Need to start with a clean slate – we will need to sit for one year to build up the data and accept increase for 11/12 new IDFs</li> <li>▪ There is a need for rules around the data</li> </ul>	<ul style="list-style-type: none"> <li>▪ Send abstracts and dates to PMgrs</li> <li>▪ Eseta to put a paper forward to the GMs – circulate paper to</li> </ul>	<ul style="list-style-type: none"> <li>▪ Akatu</li> </ul>

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		<ul style="list-style-type: none"> <li>▪ SLA development to include quarterly reporting regionally and per DHB</li> <li>▪ New beds to start on the 01 July to line up with IDF year</li> <li>▪ Waikato have budgeted for 50% and are happy to cover that cost with the other three DHBs splitting the additional 50% cost</li> </ul> <p><b>Midland Clinical Leadership Forum</b></p> <ul style="list-style-type: none"> <li>▪ National forum doesn't suit Eseta and also excludes the representatives from MRADD, MRPMgrs &amp; the clinical leadership Chairman</li> <li>▪ The MRCL reps have voiced they are not happy with the Midland approach to these meetings and have requested a meeting with Cathy Cooney &amp; Mary Smith which will be held on the 04 April</li> </ul> <p><b>DAP Example</b></p> <ul style="list-style-type: none"> <li>▪ The Midland regional MH&amp;A sections of the DAP has been rewritten by Katherine and supported by Eseta – this was tabled with the agenda</li> <li>▪ Wording to be changed in 2<sup>nd</sup> section under deliverables to:</li> </ul> <p><b><i>Proportion of child and youth accessing adult impatient beds will remain less than 2% of total child and youth inpatient bed volumes</i></b></p>	<p>PMgrs for feedback</p>	
2.5	<b>Health Needs Consultation</b>	<ul style="list-style-type: none"> <li>▪ Final report will go to the PMgrs and Clinical Leadership group and then this will go to GMs for feedback and sign off</li> <li>▪ Names and organisations have been removed from the report purposely</li> <li>▪ Methodology used is robust and good starting point</li> <li>▪ There are concerns about the quality of the data this may need to be reviewed individually</li> <li>▪ Need to have a discussion around the “key findings” and develop local/regional approaches as some findings will not be relevant for all districts or at different levels</li> </ul>	<ul style="list-style-type: none"> <li>▪ All to feedback by the 31 March</li> <li>▪ The report and data will be revisited in a years time to update data sets &amp; tables</li> </ul>	
2.6	<b>PRIMHD Update</b>	<p><b>Waikato</b></p> <ul style="list-style-type: none"> <li>▪ One provider to go on PRIMHD online scheduled 29 Mach</li> <li>▪ Issues around Korowai – Medtech no resolution regarding costs to write the scripts</li> <li>▪ Rest of the services are going with vendors</li> </ul> <p><b>BOP</b></p> <ul style="list-style-type: none"> <li>▪ All mapping documents in the district have been sorted and signed off</li> <li>▪ There are still 15 Providers to go live (includes PRIMHD online &amp; vendors), most of these are made up of two clusters – Te Manu Toroa Nga Matapuna Oranga &amp; Poutiri <ul style="list-style-type: none"> <li>▪ Nga Kakano who is a subcontractor will not be joining the cluster and will be going with Profile</li> <li>▪ Getsmart have confirmed they will join a cluster</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>▪ Vivienne to follow up</li> </ul>	

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		<ul style="list-style-type: none"> <li>▪ Ngati Rangi Iwi needed sorted as they are using Apple computers</li> <li>▪ Assisting Nga Matapuna cluster with backlog of data</li> <li>▪ Need support with a provider which needs to be followed up with Connie</li> <li>▪ One service decided to not go with a vendor (in scope provider)</li> </ul> <p><b>Lakes District</b></p> <ul style="list-style-type: none"> <li>▪ ARC Counselling – working with a vendor and nearing completion</li> <li>▪ Mana Mental Health, staff to be retrained</li> <li>▪ Mangakino should be live</li> <li>▪ Ngati Pikiako (BOP &amp; Lakes) are live</li> </ul> <p>Wild Bamboo – not behind in the Midland region as the coordinators are working alongside the vendor...</p> <p><b>Midland PRIMHD User Guide</b></p> <ul style="list-style-type: none"> <li>▪ Documentation included with agenda</li> <li>▪ PRIMHD Business Rules (to be given to NGOs) not allowed to distribute publically as per MoH</li> <li>▪ Report to be completed by 01 May so CD's can be made up and sent out to provide feedback before finalisation</li> <li>▪ Recommend to add at the start of the document a directive where certain user groups would find information relevant to their role</li> <li>▪ Document will be used as a reference by Portfolio Managers</li> <li>▪ Mapping document training – PowerPoint is available if you are interested</li> </ul> <p><b>Evaluation of PRIMHD Project</b></p> <ul style="list-style-type: none"> <li>▪ Tabled the evaluation – this will be sent electronically</li> <li>▪ Evaluation will be managed/evaluated through Monkey Survey</li> <li>▪ Survey has been setup to capture and separate Service Managers, P&amp;F &amp; administrators results</li> </ul>	<ul style="list-style-type: none"> <li>▪ To give feedback on the User guide by 01 May</li> <li>▪ To give feedback on the questions within the survey – 2 week timeframe</li> </ul>	
2.7	<b>Kaupapa National Specs</b>	<p><b>Overview</b></p> <p>Kaupapa Maori specifications for the purchase unit codes are not going to be put through. This means P&amp;F cannot differentiate spending for Kaupapa Maori services and will have to manually calculate spending. This will also have an impact with clearly identifying Kaupapa services in the PU Coding.</p> <ul style="list-style-type: none"> <li>• Disagreement with removing the “K”, however there is no choice</li> <li>• This matter is GM Maori and GM Planner &amp; Funders who will need to sort through not Portfolio Managers</li> </ul> <p><b>Recommendation put forward</b></p> <ul style="list-style-type: none"> <li>• Northern and Midland could collaboratively approach the issues together around the Kaupapa Service Specifications to get more traction to move</li> </ul>		

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		<p>forward</p> <ul style="list-style-type: none"> <li>• There needs to be a regional agreement to identify Kaupapa services in our districts</li> <li>• Need to have an agreement what processes we need to go through to identify our Kaupapa services in the region</li> </ul>	<ul style="list-style-type: none"> <li>▪ To develop a process to identify services &amp; manage spending</li> </ul>	
2.8	<b>IDF Relationships</b>	<ul style="list-style-type: none"> <li>▪ Portfolio Managers and Analysts should be working collaboratively through the IDFs</li> <li>▪ The IDFs are worked through once a year at the same time</li> <li>▪ Need to keep an eye out on the main players for Midland through the IDFs, eg, Nova &amp; Springhill etc...</li> </ul> <p><b>SPRINGHILL / NOVA – Regional Beds</b></p> <ul style="list-style-type: none"> <li>▪ Regional agreement through the IDFs</li> <li>▪ Need to have a face to face with them about their structure</li> <li>▪ Need to find consistency with all regional beds</li> </ul>	<ul style="list-style-type: none"> <li>▪ Continue discussion about the regional beds at our <b>next mtg</b></li> </ul>	
2.9	<b>Whanau Ora</b>	<ul style="list-style-type: none"> <li>▪ Integrate contracts – NGO user group</li> </ul> <p><b>Update from Nga Purei Whakataa Ruamano</b></p> <ul style="list-style-type: none"> <li>▪ Pilot occurring in the DHB with discussions occurring at an iwi level</li> <li>▪ Agreement there wouldn't be any Whanau Ora pilots to present at the September "swap shops"</li> <li>▪ At the Whanau Ora day in 2010 everyone interpreted this differently and Nationally they too have their own versions</li> <li>▪ Whanau ora re: access and negotiating – failed to understand where Tertiary and Secondary services processes</li> </ul>	<ul style="list-style-type: none"> <li>▪</li> </ul>	
3.0	<b>Sleep Over Ruling</b>	<ul style="list-style-type: none"> <li>▪ Keep an eye on the ruling for sleepover's as this will have a dramatic effect in the sector</li> <li>▪ Kaupapa Maori Services have expressed they would like to continue with sleepovers</li> <li>▪ Some providers have installed emergency panic buttons and or security firm to support for Tangata Whaiora – this may need to be a requirement in agreements</li> </ul>	<ul style="list-style-type: none"> <li>▪</li> </ul>	
3.1	<b>CEP Level's Competency</b>	<p><b>New Clause</b></p> <ul style="list-style-type: none"> <li>▪ New clauses in agreements for 2011 – all providers to do self assessment tool by 31 Sept 2011. These to be addressed by 2012</li> <li>▪ Shifting all old Dual Diagnosis from the NGOs into provider arms and will continue to provide community support (stand alones).</li> <li>▪ Providers are happy with the new service specs and are comfortable with the transition</li> </ul>	<ul style="list-style-type: none"> <li>▪ Rachel to send through clause for CEP waiting times</li> </ul>	

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		<p><b>Case Formulation Training</b></p> <ul style="list-style-type: none"> <li>▪ Enrolling processes is upsetting people, there is no consistency</li> <li>▪ Midland running additional training in the region – two in each district</li> </ul> <p><b>CEP Level of Competency</b></p> <ul style="list-style-type: none"> <li>▪ Taranaki and Lakes completed</li> <li>▪ BOP – Thursday</li> <li>▪ Tairāwhiti – coming up</li> <li>▪ Enhanced practitioners – MH&amp;AOD qualification, invites went out to all enhanced practitioners to attend meeting</li> </ul>		
3.0	<b>Meeting Close</b>	<ul style="list-style-type: none"> <li>▪ <b>2.35pm</b></li> </ul>		
3.1	<b>Next Meeting</b>	<ul style="list-style-type: none"> <li>▪ <b>25 May 2011 – Best Western Braeside, Rotorua</b></li> <li>▪ Katherine &amp; Rachel have given apologies as they will not be attending this meeting due to other commitments</li> </ul>		